

# United States Department of the Interior

NATIONAL PARK SERVICE Mojave National Preserve 2701 Barstow Road Barstow, California 92311

#### APPLICATION REQUIREMENTS FOR A SPECIAL PARK USE PERMIT FOR FILMING/PHOTOGRAPHY

In response to your inquiry concerning Special Park Use, enclosed is a Special Park Use Application Worksheet for you to complete and return to us. It is important that the worksheet be as detailed as possible concerning your proposed activity. For example, we must know where you propose to conduct your activity or, event; the number of participants; what type of equipment you will use; and any special effects you may wish to use. Please allow a *minimum of 21 business days* for processing.

If you are not familiar with the area, it is advisable to make an advance-scouting trip for routes and/or locations. You will not be permitted to arrive and then select routes/locations on the day of the event.

For guided tours, sporting events or other organized gatherings, you will need to attach a copy of advertisements, flyers, brochures, and all information sent to participants.

The information on the worksheet will be utilized by the National Park Service (NPS) staff to evaluate the impact of your activity on park resources and visitors, the appropriate type of permit, and any additional fees required. It may require-several weeks to review your request and render a decision.

A non-refundable \$100 application fee is required from all applicants, regardless of whether or not the permit is issued. This payment must accompany the permit worksheet. Please make your payment out to National Park Service.

The NPS has the authority to collect or recover from Special Park Use Permittees any or all of the costs associated with the special use activities. If the permit application is approved, an administrative processing fee (\$155.00) and monitoring fees (minimum of two hours at \$50.00/hour, or \$65.00/hour for overtime rates) may be charged to the permittee. Location fees will be charged based on the number of people and number of days involved. The sole exception to location fees is as follows:

"Commercial videographers, cinematographers, or sound recording crews of up to two people with only minimal equipment (i.e., one camera and one tripod) working in areas open to the public are required to obtain a commercial filming permit and are subject to appropriate permit terms and conditions and cost recovery charges but are not subject to location fees."

If your request is approved a Certificate of Insurance will be required showing that you have general liability insurance coverage of \$1,000,000. This certificate must name the **United States Government /National Park** Service/Mojave National Preserve as "additional insured". Other coverage limits may be required based on the requested activity. If required, we will need an **original** certificate of insurance for our files. The permittee's name must be on the Certificate Insurance. A performance bond (cash or cashier's check) may also be required. The amount of the bond will be determined from the information provided on the worksheet. This bond will be returned to you upon completion of your activity if all stipulations have been met and park resources have not been damaged.

Please submit the enclosed Application Worksheet and your permit processing fee (payable to the National Park Service) via US Mail, UPS or Federal Express to the address below. You may email or FAX the worksheet, with the original signed application worksheet and application fee to follow.

National Park Service, Mojave National Preserve Attention: Special Use Permits 2701 Barstow Road Barstow, CA 92311

fax: (760) 252-6174 email: moja sup@nps.gov

tel: (760) 252-6107

(NPS Form 10-931) (OMB No. 1024-0026) (NEW 10/00) (Expires 3/31/2010)

Applicant:

## National Park Service Mojave National Preserve 2701 Barstow Road, Barstow, CA 92311 tel (760) 252-6107, fax (760) 252-6174



## Application for Commercial Filming/Still Photography Permit— Short Form

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information**. Allow **AT LEAST** four (4) business days for processing. A non-refundable processing fee should accompany this application unless the requested use is an exercise of a First Amendment right. You will be notified of the disposition of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges, a location fee, and proof of liability naming United States as also insured.

Company:

Social Se	curity #:		Ta	x ID #:			
Street/Ad	ldress:		Sta	Street/Address:			
City/State/Zip Code:				City/State/Zip Code:			
Telephon	e #:		Te	lephone #:			
Cell phor	ne #:		Ce	ll phone #:			
Fax #:			Fa	x #:			
Email:			En	nail:			
Project name:				Producer:			
Type of p	project:		Ph	Photographer:			
Location	manager:		Di	Director:			
Telephon	e #:		Ca	Caterer:			
Cell phor	ne #:		Te	lephone # - set:			
	ULE BY LOCATIO						
Date	Location	Start Time	End Time	Type of Activity	Number of Cast		
Dute	Location	Start Time	Liid Tille	(e.g., film, prep, or strike)	& Crew		

List of vehicles including ty	pe and license plate numb	oer (attach additional pag	ges if necessary):
Vehicle Make and M	Model	License N	umber
Are you familiar with/ have Have your obtained a perm (If yes, provide a l Do you plan to advertise or	it from the National Park is ist of permit dates and loca	Service in the past? ations on a separate page	Y
I hereby state that the above information or false statemed I have the full authority to r	ents have been given. All	estimates are reliable to	the best of my knowledge
Signature:	Print Naı	me:	Date:
T. 1	Compan	v Name:	*********

y o refundable. This completed application should be mailed to **Attention: Special Park Uses Coordinator** at the address found on at the top of this application.

Note that this is an application only, and does not serve as permission to conduct any use of the park. If your request is approved, a permit containing applicable terms and conditions will be sent to the person designated on the application. The permit must be signed by the responsible person and returned to the park prior to the event for final approval by the Park Superintendent.

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The above application form is provided with the understanding that parks will insert appropriate park names and addresses and the amount of the application fee as desired.

Paperwork Reduction Act Statement: This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. All the applicable parts of the form must be completed. A Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service, Special Park Uses Program Manager, 1849 C Street NW (2465), Washington, D.C. 20240.

### US DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE MOJAVE NATIONAL PRESERVE

2701 BARSTOW ROAD, BARSTOW, CA 92311 fax: (760) 252-6174, telephone: (760) 252-6107

#### **CREDIT CARD PAYMENT FORM**

This National Park Service invoice may be charged to your VISA, MASTERCARD, AMERICAN EXPRESS, DISCOVERY, or paid with check or other negotiable instrument. This form must be submitted by mail, email or fax to the address above.

,	-		•	email or tax to the address at
	n card:			
CITY	STATE		ZIP CODE	COUNTRY
Credit Card Number		T T T		
Evaluation Date:	VISA MASTERCARD		AN EXPRESS	DISCOVERY
Amount Authorized:	\$ <u>(USD)</u>	Date:		
Telephone:		-		
Signature:				
				fully to provide any departmer entations as to any matter with
		OFFICE USE	ONLY	
Mojave National Preser	ve Account Number:			
Mojave National Preser	ve Reference Number:			
Items or Services:				
Receiving Official:	SIGNATURE			PRINTED NAME